Δ nn!	In ati	OD	$\cap r$	Docket	Number
$-\alpha\nu\nu$	けいしょい	Car i	· / i	1 7 1 7 7 7 7	1 (2) (3) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I					SM	MALL EN	NTITY		OTHER	THAN		
Γ		(Column 1)		(Column 2)		TY	TYPE		OR	SMALL ENTITY		
TOTAL CLAIMS							RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		*			X40=		OR	X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				F	+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2	L	TOTAL		OR	TOTAL	16 36
CLAIMS AS AMENDED - PART II										OTHER		
		(Column 1)		(Colu		(Column 3)	5	SMALL E	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***				X40=	·	OR	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		Ţ.	+135=		OR	+270=	
							AD.	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=		X40=		OR	X80=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM			+135=		OR	+270= '	
							AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu		(Column 3)						
ENT C		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		0.0	X80=	
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM		-			OR		
		A 1. 1		6	- 407 :	sk 2	L	+135=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ** ADDIT. FEE *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												